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Substitute	for	Form PTO-1449A/PTO	Attorney D	Application No.:			
INFORMATION D	ISCLO:	SURE STATEMENT BY APPLICANT		10/608,163			
(use as many sheets as necessary)			EXAMINER				
			First Name	,			
Sheet of			Filing Date	Group Art: 1762			
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P		WO 02/45869	13.06.02	J. Maijala et al.			
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.							

SHEET 1 OF 2

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